

**North Carolina Division of Mental Health, Developmental
Disabilities and
Substance Abuse Services**

**Complaints Received By
Local Management Entities**

**State Fiscal Year 2008-2009
Quarter 2**

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Prepared by

**Customer Service and Community Rights Team
Advocacy and Customer Service Section**

Executive Summary

North Carolina Administrative Code (10A NCAC 26G.7001-7003) requires that all Mental Health, Developmental Disabilities and Substance Abuse Local Management Entities (LMEs) utilize standardized complaint response and complaint reporting procedures regarding services provided in their catchment areas. These rules state that LMEs are required to receive, review, respond to and report complaints regarding any mental health, developmental disability and/or substance abuse service. This requirement includes complaints regarding all facilities licensed under NC General Statute 122C-Article 2 (except hospitals), unlicensed community-based services and LME services. For the purpose of this report and LME data collection, we define *complaints* as “any expression of dissatisfaction.”

This report includes aggregate statewide data and does not include data for each individual LME¹. It is difficult to interpret with certainty the reasons for variability in complaint rates among LMEs. A higher number of complaints may be a result, for example, of increased education for consumers, families and providers about consumer rights, the complaint rule and/or empowerment efforts to encourage the reporting and resolution of complaints. In fact, it is expected that aggregate data in future reports will likely show increases in the number of complaints reported to the LMEs due to public awareness and consumer education activities. Therefore, any LME data comparisons would be problematic. LMEs possess data relevant to their own catchment areas and should use this data to identify trends that might inform quality management activities.

The complaint data is utilized at the LME level to inform management of trends that may justify further action or indicate an issue in their catchment area. Many LMEs report data trends to their Client Rights Committees, Board of Directors, Quality Management and Area Directors to ensure an expedient response to potential areas of concern. LMEs look at complaint patterns to identify opportunities for quality improvement and provide technical assistance when needed to ensure that appropriate action is being taken. For example, LME staff may initiate an investigation or a provider review as a result of an individual complaint. Importantly, LMEs also provide this information to local Consumer Family Advisory Committees (CFACs).

State Fiscal Year (SFY) 08-09 2nd Quarter Complaint Data Highlights:

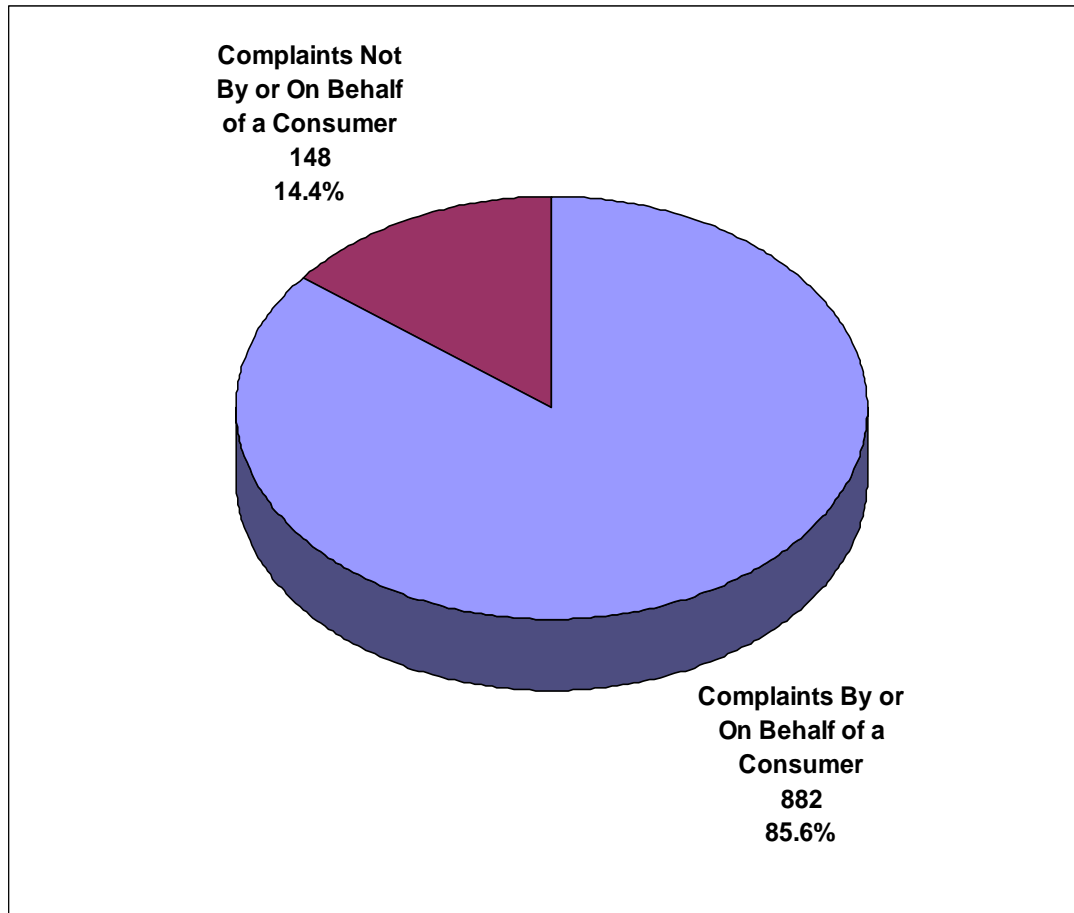
- A total of 1,030 complaints were made to LMEs between October 1, 2008 and December 31, 2008. Eight hundred and eighty two (85.6%) of the complaints received were by or on-behalf of a consumer and 148 (14.4%) of the complaints received were not by or on behalf of a consumer because they did not directly involve a particular individual.
- Consumers (271) made 26% and parents/guardians (304) made 29 % of the total number of complaints during this quarter, accounting for over half of the complaints reported statewide. Providers initiated 160 (16%) of the complaints.

¹ LME data is available upon request. Please contact Stuart Berde at (919) 715-3197 or Stuart.Berde@ncmail.net.

- Five hundred and thirty three (60.4%) of the 882 complaints related to consumers were filed regarding an adult and 297 (33.7%) were by or on behalf of a child or adolescent. Four hundred and sixty four (52.6%) of the consumers involved had a mental health diagnosis, 189 (21.4%) had a developmental disability diagnosis, and 131 (14.9%) had multiple disabilities and 35 (4%) had a substance abuse diagnosis.
- Three hundred and forty four (34%) of the complaints involved quality of care, 169 (17%) involved authorization/billing/payment issues and 112 (11%) involved access to services.
- During the second quarter of FY 2008–2009, Community Support-Adult services received 191 (18.54%) of the total complaints and Community Support-Child received 133 (12.9%) of the total complaints.
- One hundred and eighty five (18%) of the complaints resulted in an investigation by the LME, DHSR, DSS or DMH/DD/SAS.
- Of the 185 complaint investigations that took place, 63 (34.1%) were not substantiated, 74 (40%) were substantiated and 48 (25.9%) were partially substantiated.
- Seventy two (39%) of the complaints that were investigated required no further action, 73 (39%) required a corrective action plan and 40 (22%) resulted in recommendations to the provider.
- Nine hundred and eighty eight (95.9%) of the total complaints this quarter were resolved.
- Eight hundred and forty five (82%) of the complaints this quarter did not require an investigation. Of these, 463 (55%) were resolved by working with the provider, 200 (24%) were resolved by providing technical assistance to complainants and 140 (17%) were resolved by mediation.
- The final dispositions for 1,000 (98%) of the complaints occurred at the LME level.
- Nine hundred and sixteen (90%) of the complaints this quarter were resolved within 30 days of receipt of the complaint.

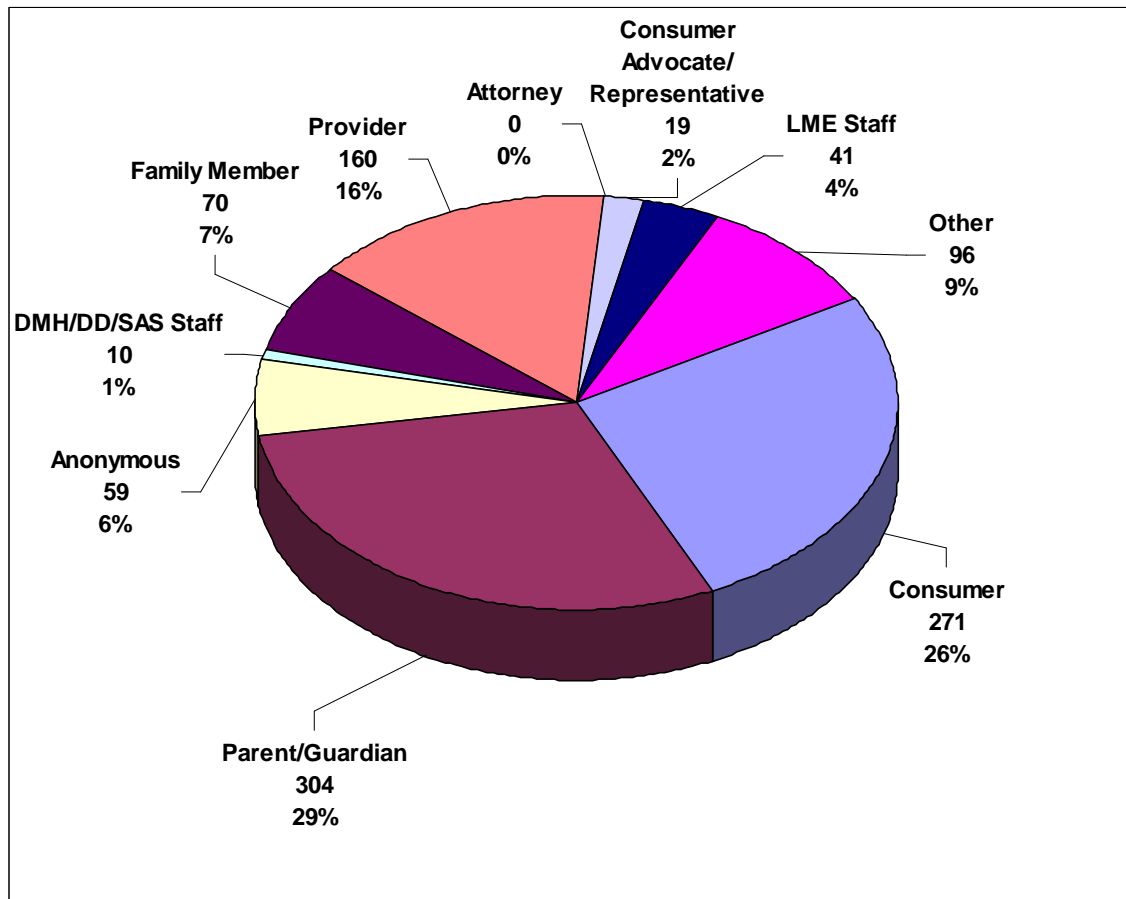
Total Number of Complaints

LMEs received a total of 1,030 complaints from October 1, 2008 to December 31, 2008. Eight hundred eighty two (85.6%) of the complaints received were by or on behalf of a consumer and 148 (14.4%) involved administrative issues, billing issues and personnel issues.



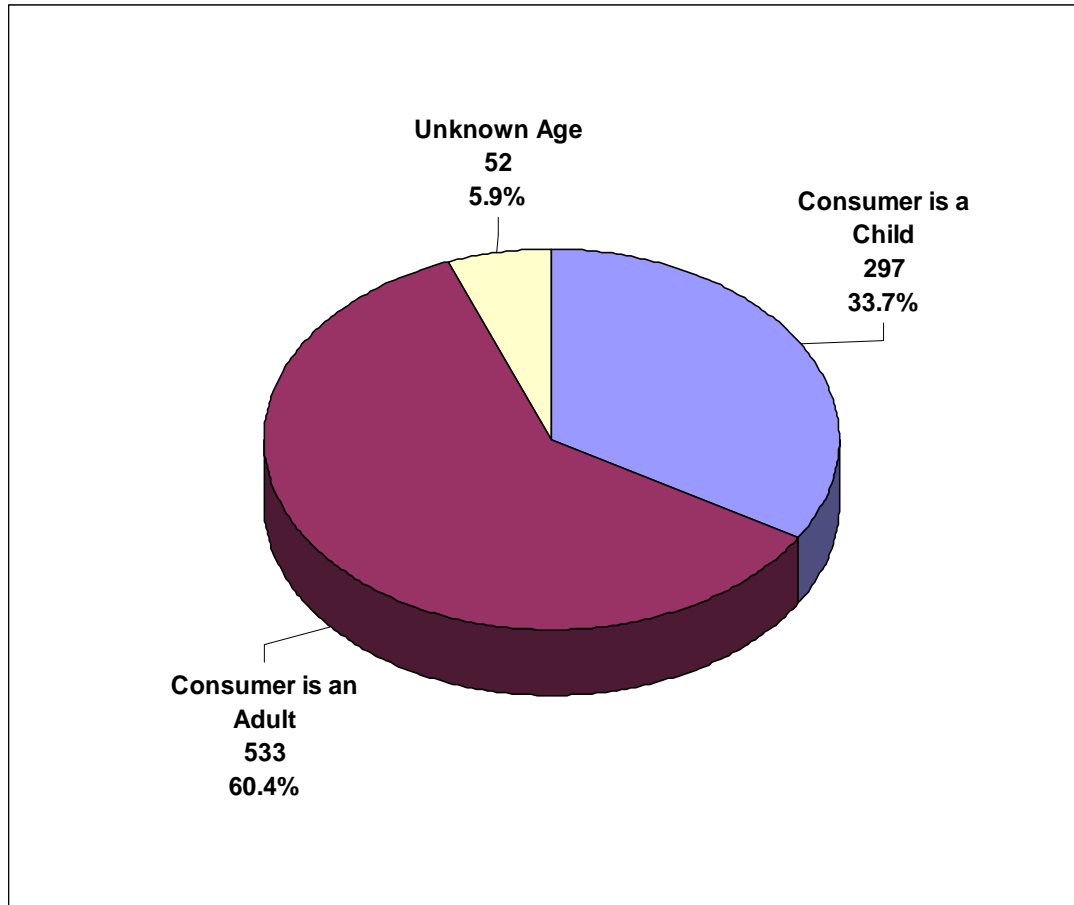
Complaint Source

Parents/guardians (304) made 29% of the complaints and consumers (271) made 26% of the complaints to LMEs this quarter. One hundred and sixty (16%) of the complaints were initiated by providers. Seventy (7%) were made by family members, 59 (6%) were made by anonymous persons and 41 (4%) were made by LME staff. The chart below illustrates the remaining contact sources for this quarter.



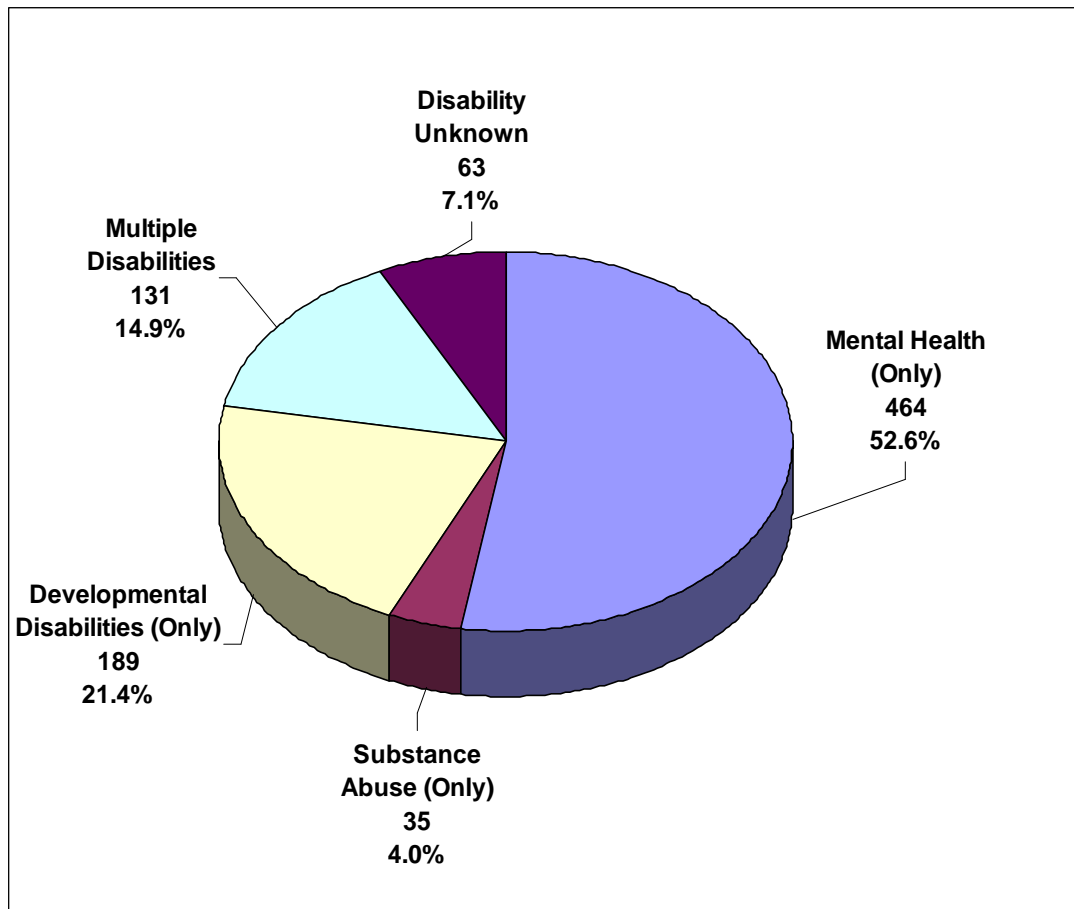
Complaints By Or On Behalf of a Consumer:
Consumer's Age Group

Statewide, 882 complaints were received by or on behalf of a consumer from October 1, 2008 to December 31, 2008. Five hundred thirty three (60.4%) were by or on behalf of an adult (age 18 or over), 297 (33.7%) were by or on behalf of a child (age 0-17) and for 52 (5.9%) the consumer's age was unknown.



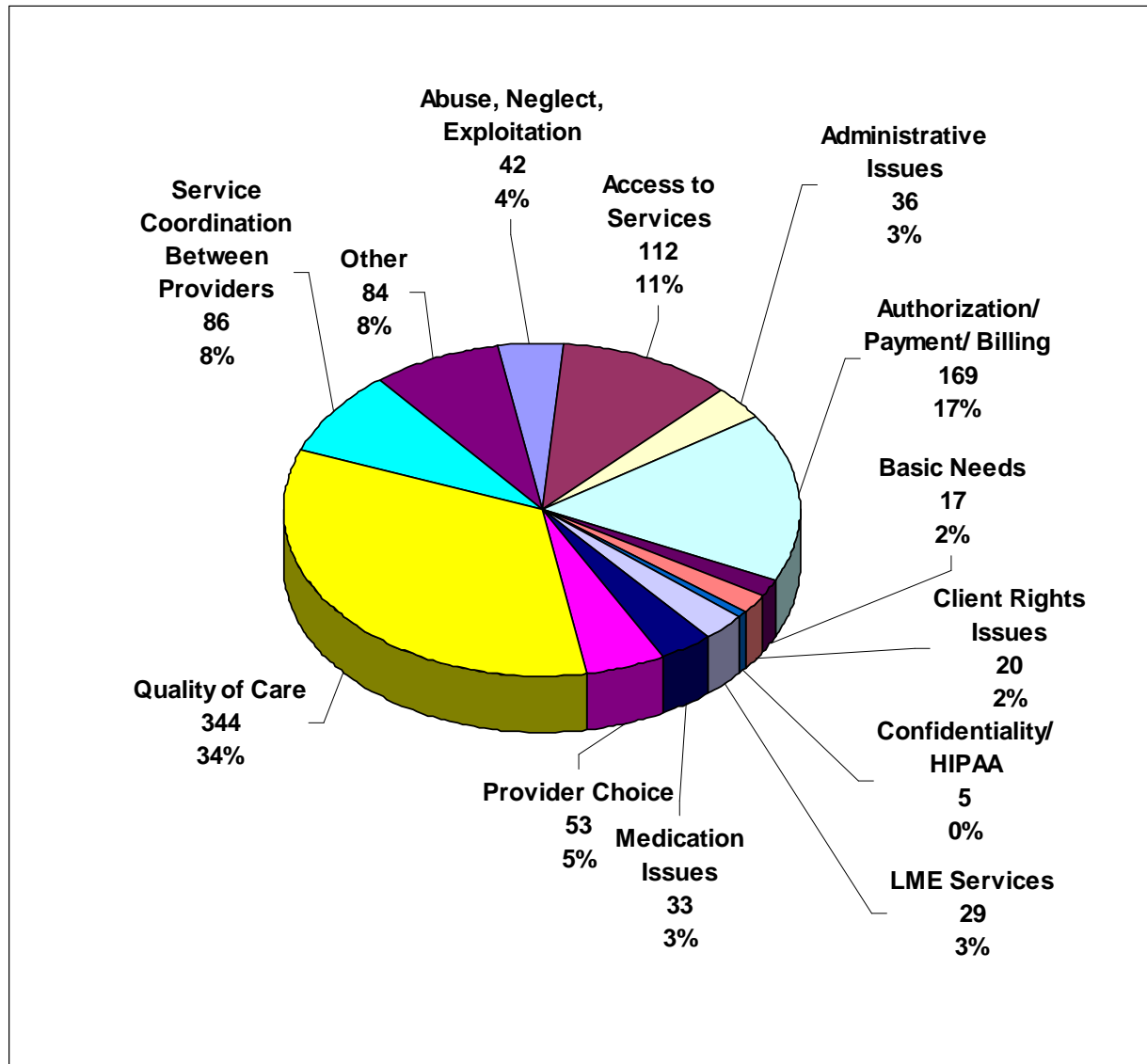
Complaints By Or On Behalf of a Consumer: **Consumer's Disability Group**

Four hundred and sixty four (52.6%) of the complaints involved a consumer who had a mental health diagnosis, 189 (21.4%) involved consumers who had a developmental disability diagnosis, 131 (14.9%) involved consumers who had multiple disabilities, 35 (4%) involved consumers who had a substance abuse diagnosis and for 63 (7.1%) of the consumers involved the disability was unknown.



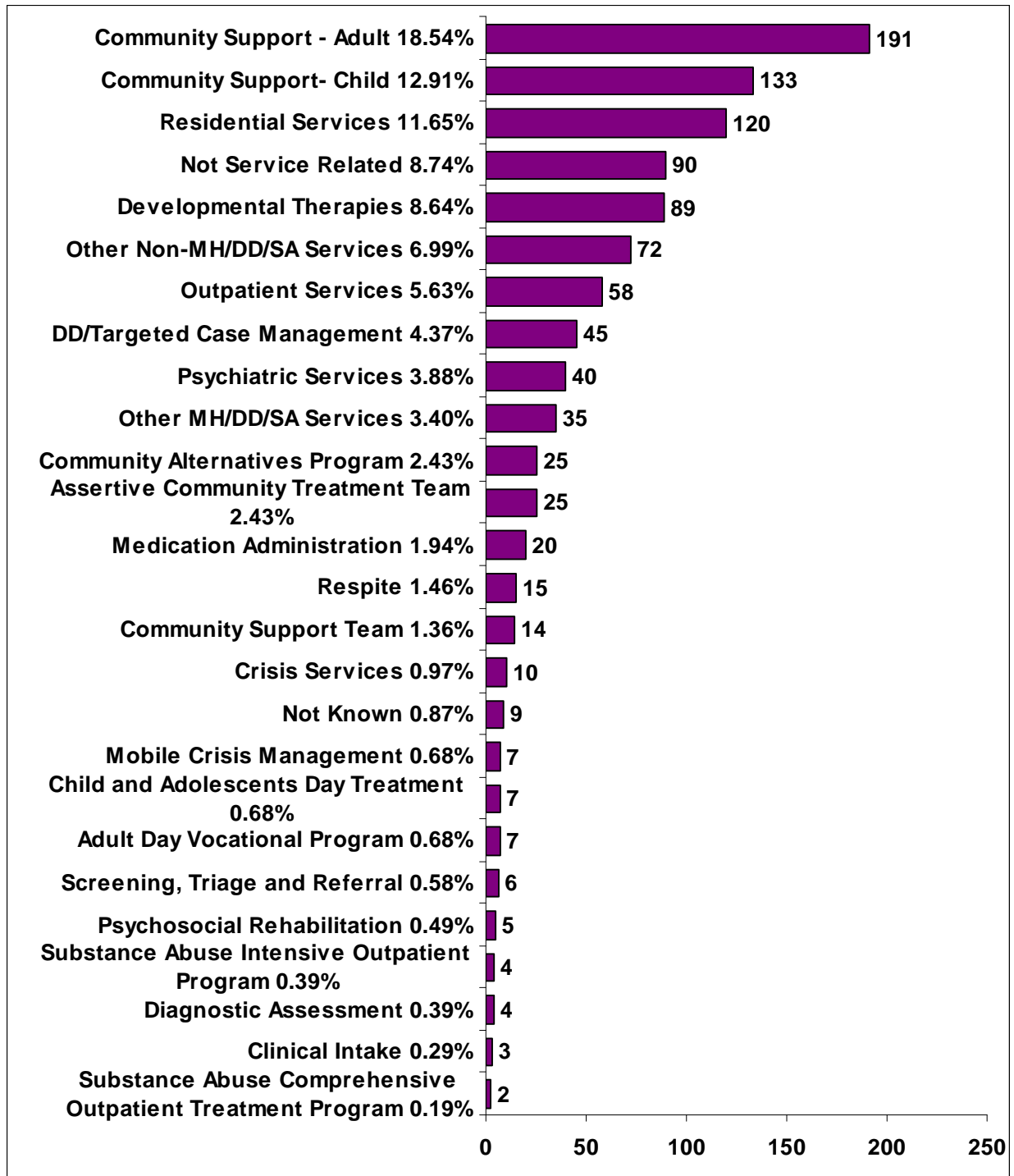
Primary Nature of the Complaint

The issues associated with the complaints are categorized in the graph below. Three hundred and forty four (34%) of the complaints were related to quality of care, 169 (17%) to authorization/payment/billing and 112 (11%) to access to services.



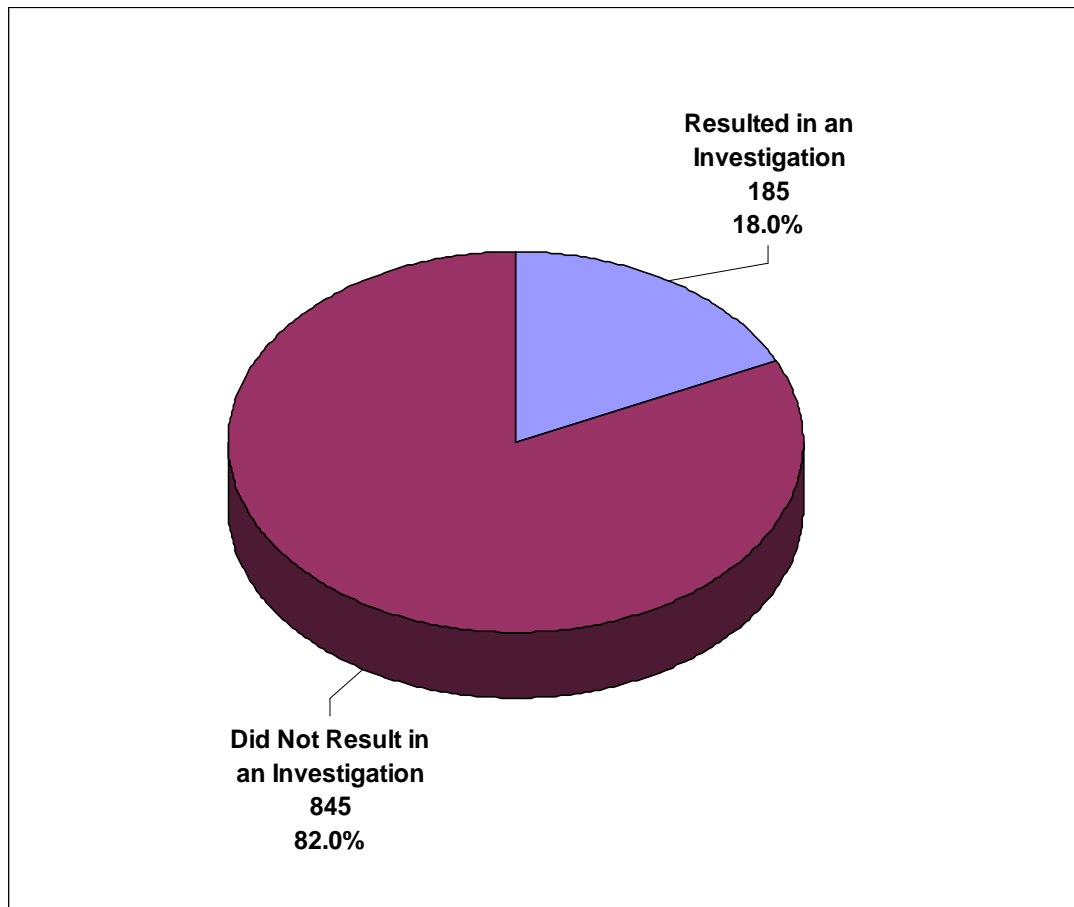
Type of Service Associated with the Complaints

Community Support (CS) services were associated with 324 (31.45%) of the total complaints this quarter with CS-Adult 191 (18.54%) and CS-Child 133 (12.91%) of the complaints. Residential services accounted for 120 (11.65%) and complaints that were not service related accounted for 90 (8.74%) of the total complaints.



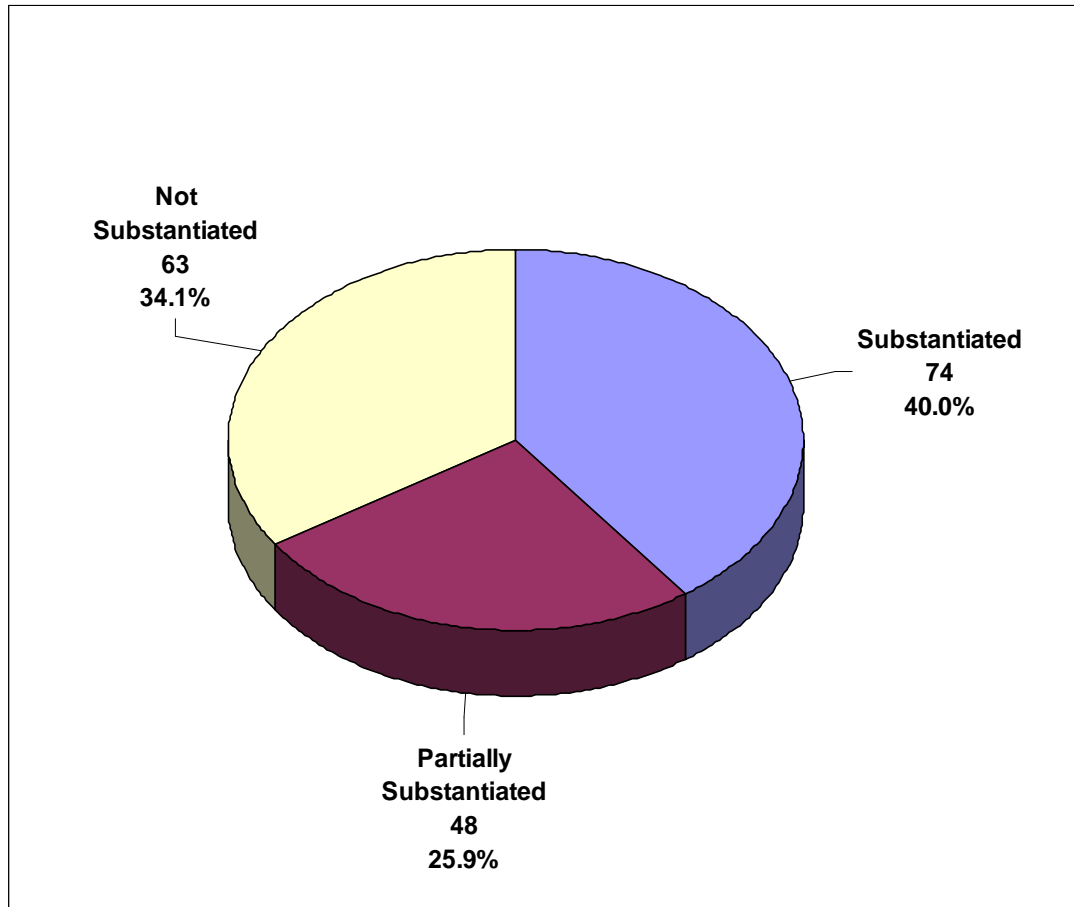
The Number of Complaints that Resulted in an Investigation

Statewide, LMEs received a total of 1,030 complaints from October 1, 2008 to December 31, 2008. One hundred and eighty five (18%) complaints resulted in an investigation by the LME, DHSR, DSS or DMH/DD/SAS. The remaining 845 (82%) complaints did not result in an investigation.



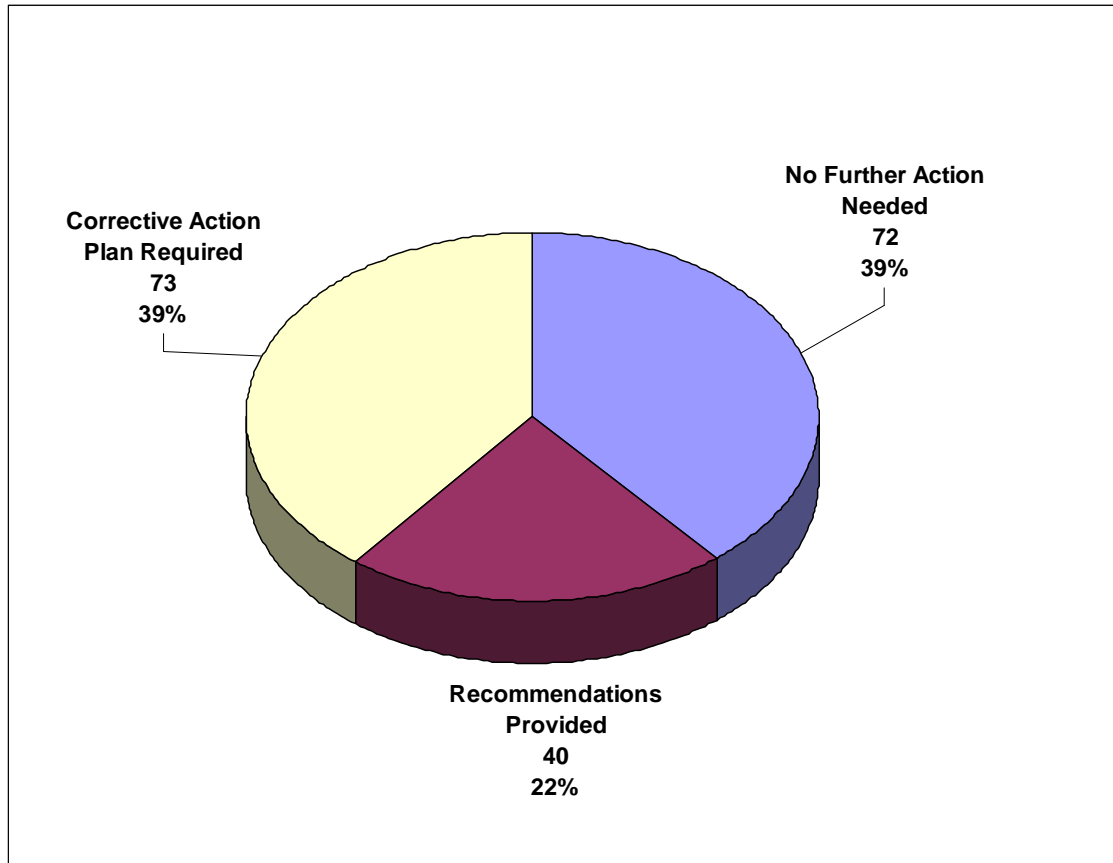
Complaint Investigation Results

Statewide, of the 185 complaints that were investigated during the second quarter, 63 (34.1%) were not substantiated, 74 (40%) were substantiated and 48 (25.9%) were partially substantiated.



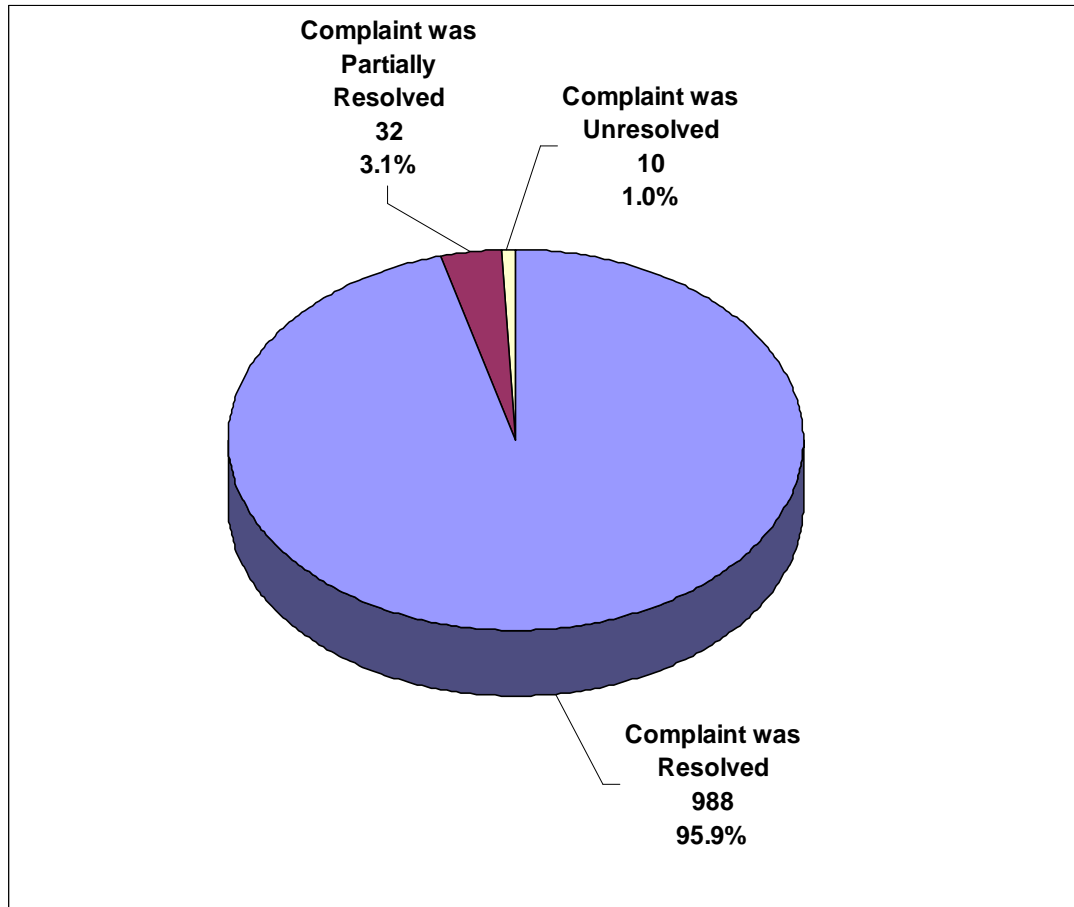
Actions Following the Investigations

During this quarter, 72 (39%) of the complaints investigated resulted in no further action needed. Seventy three (39%) of the complaint investigations resulted in a corrective action plan from the provider and 40 (22%) resulted in recommendations to the provider.



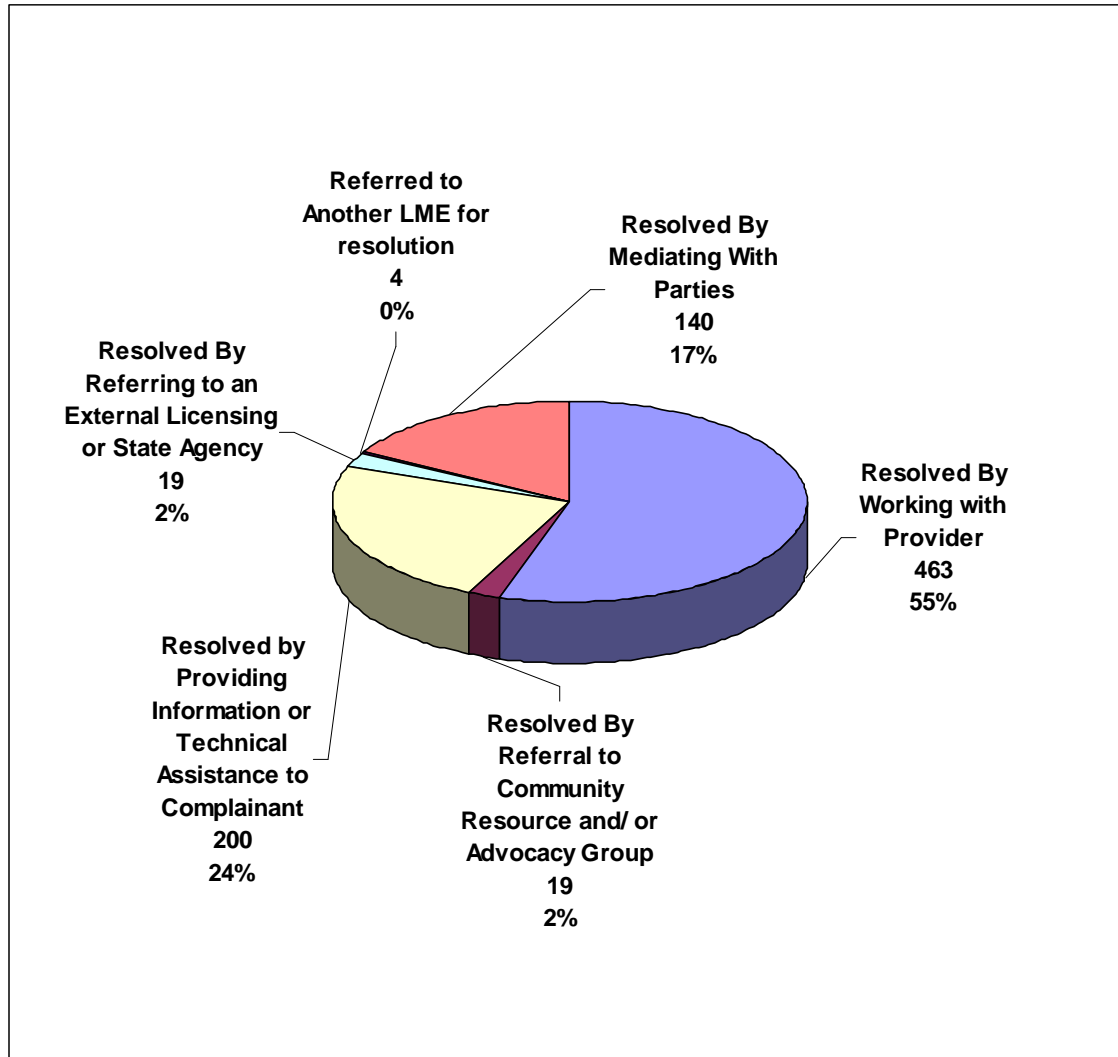
Final Disposition for all Complaints

Statewide, of the total number of complaints that were received by LMEs during this quarter, 988 (95.9%) were resolved, 32 (3.1%) were partially resolved and 10 (1%) were unresolved.



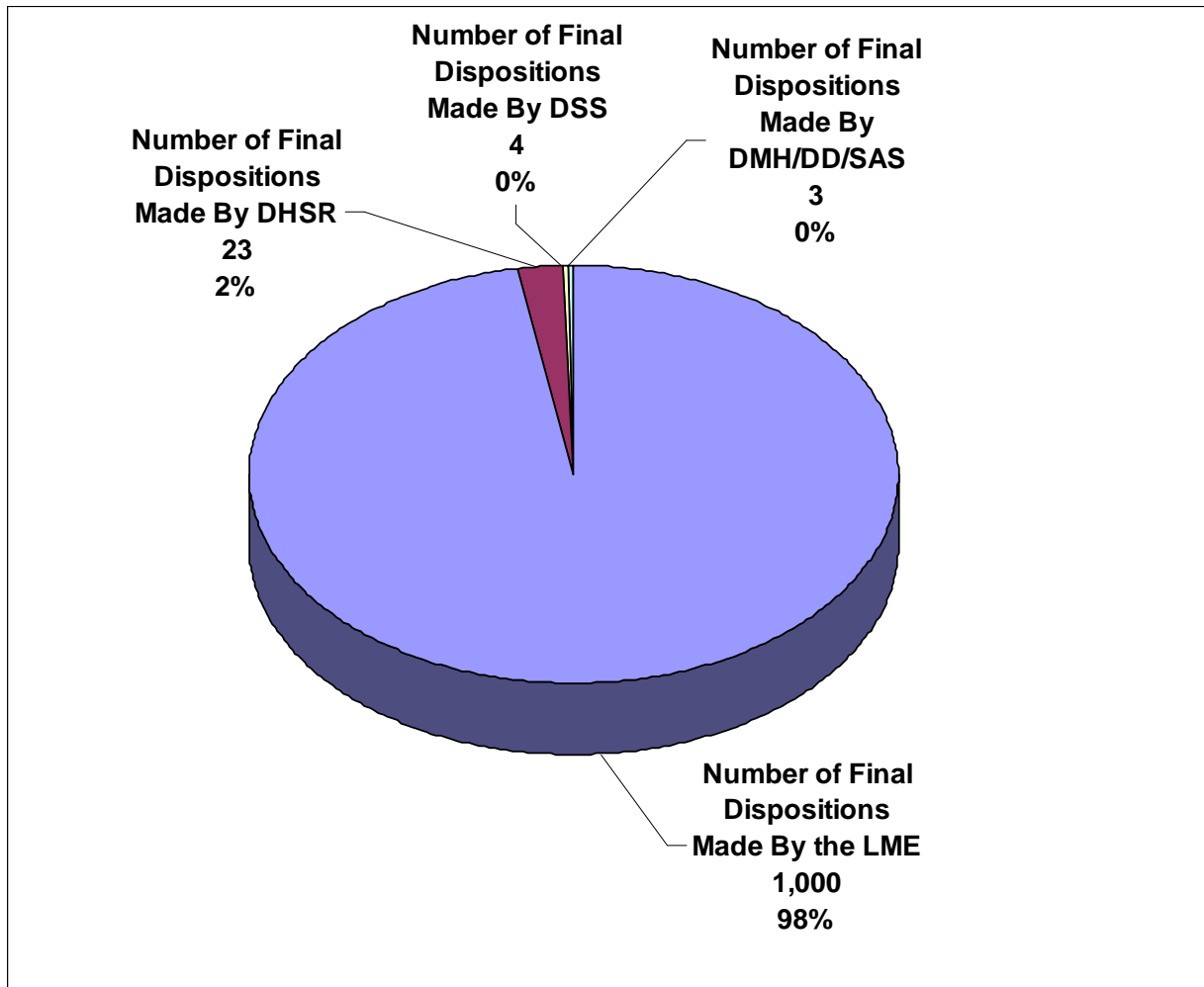
Resolution for Non-Investigated Complaints

Eight hundred and forty five complaints during this quarter were resolved without an investigation. More than half of these complaints, 463 or 55%, were resolved by working with the provider. Two hundred (24%) were resolved by providing technical assistance to the complainants, 140 (17%) were resolved by mediating with the parties and 19 (2%) were resolved by referring to an external licensing or state agency.



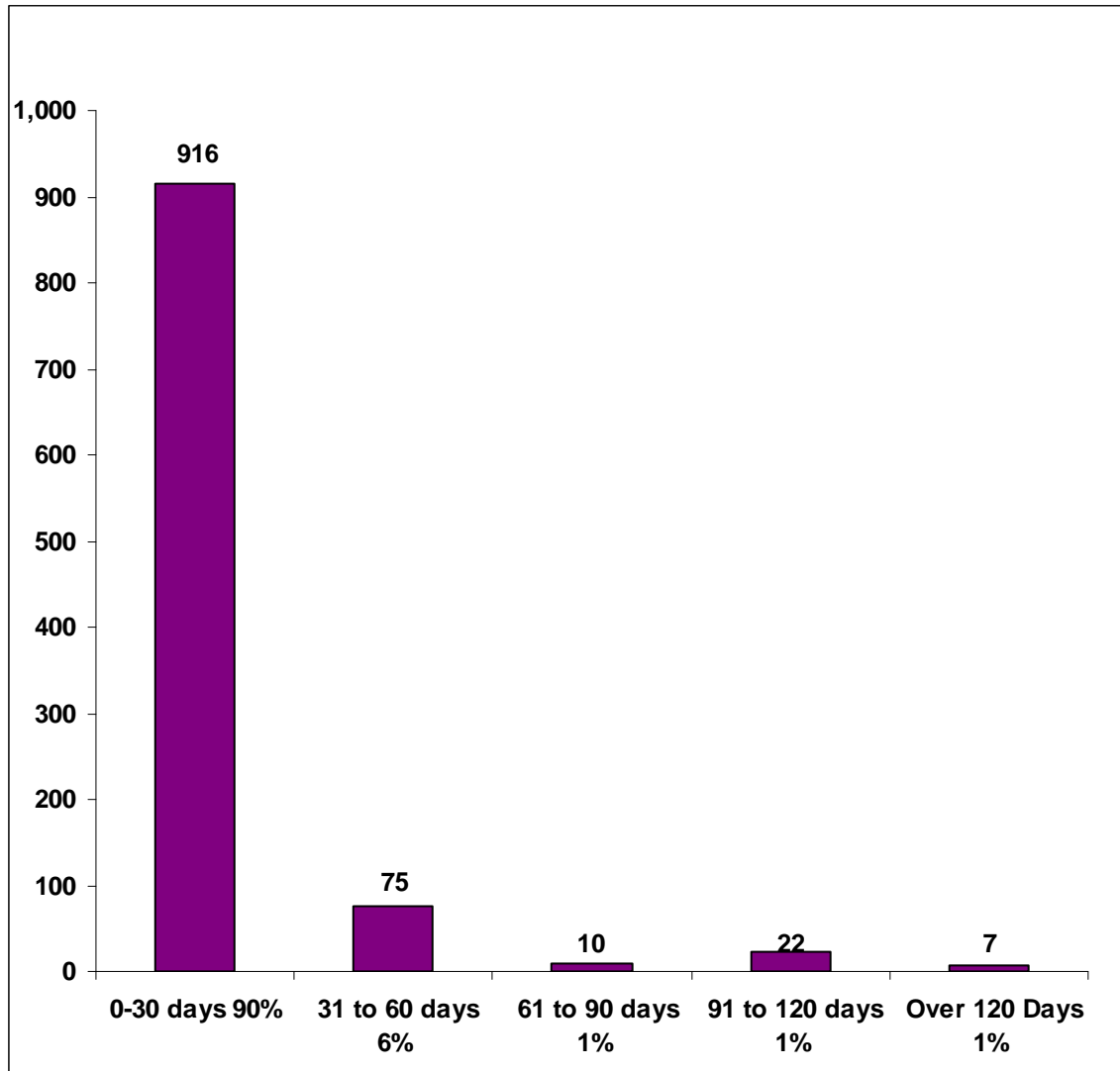
Final Disposition Authority for all Complaints

One thousand (98%) of the final dispositions were made by the LME. Twenty three (2%) of the final dispositions were made by DHSR and less than one (1%) of the final dispositions were made by DSS and DMH/DD/SAS.



Number of Days to Resolution

Nine hundred and sixteen (90 %) of the complaints received during this quarter were resolved within 30 days of receipt of the complaint. The majority of the complaints that required more than 30 days to resolve were reported to DMH/DD/SAS, DHSR, DSS or another licensing or state agency for investigation.²



² Data collection occurs during the quarter. However, data is submitted to DMH/DD/SAS 5 months after the end of the quarter to allow for complete resolution of all complaints. This provides an accurate picture of resolution and final disposition for all complaints initiated during the quarter.